1a. TYPE OF WELL:

26. TYPE ELECTRIC AND OTHER LOGS RUN

b. TYPE OF COMPLETION:

## SUBMIT IN DUPLICATE\* UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

•		NITED STA	IE INTERIOF	(See other instructions on	Budget	Bureau No. 42-R356.5.
		LOGICAL SL		reverse side)	l	f No./22
WELL CON	APLETION OR	RECOMPLET	TION REPORT	AND LOG*	6. IF INDIAN, ALL	OTTEE OR TRIBE NAME
TYPE OF WELL	.: OIL	GAS WELL	DRY Other		7. UNIT AGREEMEN	T NAME
	LETION: WORK DEEP- COVER EN		svr. Other		S. FARM OR LEASE	NAME //
NAME OF OPERATO	INPnta	10.10	ompiny		9. WELL NO.	che O
ADDRESS OF OPERA	TOR	_	88240 be with any State requir		10. FIELD AND POO	DL, OR WILDCAT
				ements)*	Z GIANCO	OR BLOCK AND SURVEY
At top prod. inter	TLE 805 rval reported below	FEL OF	= 5 pc. 4		OR AREA	
At total depth				•	JUL 4, 1-	25N, R4W
SIME	mu watan watan 🔭 w			DATE ISSUED	12. COUNTY OR PARISH	13. STATE  N. M.
- 20.77	6-26-77	7-15-7	77	ELEVATIONS (DF, RKB, R	(1, da, mrc.)	ELEV. CASINGHEAD
3915	384	12'	2. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
3784'-	AL(8), OF THIS COMPI	euth Blanc	NAME (MD AND TVD)*	cliffs	2	S. WAS DIRECTIONAL SURVEY MADE
	S GR CAL	FIC		,	27. v	NAS WELL CORED
		<del></del>	ORD (Report all strings	set in well)		
CASINO SIZE	WEIGHT, LB./FT.	D) (MD)	HOLE SIZE	CEMENTING	RECORD	AMOUNT PULLED
85/8"	24#	306	124"	300 51	(	

28. ING RECORD (Report all strings set in well) CASINO SIZE WEIGHT, LB./FT. 300 LINER RECORD TUBING RECORD BOTTOM (MD) TOP (MD) SIZE SACKS CEMENT\* SCREEN (MD) SIZE DEPTH SET (MD) PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number) W/2 ISPF South Blanco Pictural Cliffs

ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

				<del></del>					
33.*			PR	CODUCTION		_			
DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas it			wing, gas lift,	pumping—size and	type of pump)	WELL STATUS (Producing or			
7-15-77		Flowin	9			Stuf- 1	N Rodong Pop Li		
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR		GAS-MCF.	WATER-BBL.	GAS-OIL RATIO CON		
8-8-77	24	1/4"	TEST PERIOD		1396				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS-MCF.	WATER	—BBL.	DIL GRAVITY-API (CORR.)		
34. DISPOSITION OF G		uel, vented, etc.)				F. T.	C/70 V = 2		
35. LIST OF ATTACH	MENTS		1						
			· ·	Ob 12					

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

DANN, JUPY.

Instructions and Spaces for Additional Data on Reverse Side)

## NSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separante reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State

or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in them 33. Submit a separate report (page) on this form, adequately identified, interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in them 33.

tem tem 33: Submit a separate completion report on this form for each interval to be separately produced. for each 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.) additional interval to be separately produced, showing the additional data pertinent to such interval.

				FORMATION	37. SUMMARY SHOW DEPTH
				NOIT	RY OF I
					ORO PORT
		; ; ;		TOP	MARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING
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and the second s					EREOS
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					CORED INTERVALS; AND ALL DRILL-STEM TESTS, AND SHUT-IN FRESSURES, AND RECOVERIES
	:			DESC	NTERV
		• •		DESCRIPTION, CONTENTS, ETC.	ALS;
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